PTO/SB/21 (02-09) Approved for use through 03/31/2009. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/517,849 Filing Date July 22, 2005 TRANSMITTAL First Named Inventor Werner Wessling **FORM** Art Unit 1615 MAR 1 7 2009 **Examiner Name** Jeffrey T. Palenik (to be used for all correspondence after initial filing) Attorney Docket Number RO0957US (#90568) Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC  $|\mathbf{X}|$ Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC

Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information Provisional Application After Final Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Identify Terminal Disclaimer below): **Extension of Time Request** request for continued examination and Request for Refund **Express Abandonment Request** return postcard receipt CD, Number of CD(s) \_\_\_ Information Disclosure Statement Landscape Table on CD Remarks Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name D. Peter Hochberg Co., L.P.A. Signature Printed name D. Peter Hochberg Reg. No. Date 24,603 March 2009

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature

Sean Mellino

Date 3 6 9

CERTIFICATE OF TRANSMISSION/MAILING

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PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0653-002000

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Effective on 12/08/2004.			Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number	10/517,849 MAR 1 7 2009			
FEE TRANSMITTAL For FY 2009			Filing Date	July 22,	July 22, 2005		
			First Named Inventor	werner Wessing			
			Examiner Name	Jeffrey '	Jeffrey T. Palenik		
Applicant claims small entity status. See 37 CFR 1.27			Art Unit	1615			
TOTAL AMOUNT OF PAYMENT (\$) 940.00		Attorney Docket No.	RO0957	RO0957US (#90568)			
METHOD OF PAYMENT (check all that apply)							
Check X Credit Card Money Order None Other (please identify):							
The Deposit Account Deposit Account Number: 08-2441 Deposit Account Name: D. Peter Hochberg Co., L.P.A.							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s)							
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card							
information and authorization on PTO-2038.							
FEE CALCULATION							
BASIC FILING, SEARCH, AND EXAMINATION FEES  FILING FEES  SEARCH FEES  EXAMINATION FEES							
	Small Entity	SEAR	RCH FEES EX Small Entity		N FEES Entity		
Application Type Fee	(\$) Fee (\$)	Fee (\$	<u>Fee (\$)</u> <u>F</u>	ee (\$) Fee	<del>)</del> (\$)	Fees Paid (\$)	
Utility 330	165	540	270 . 2	20 11	.0		
Design 220	110	100	50	40 7	70 -		
Plant 220	110	330	165	70 8	35 .	<del></del>	
Reissue 330	165	540	270	550 32	25	···	
Provisional 220	110	0	0	0	0 .		
2. EXCESS CLAIM FEES  Fee Description  Fee (\$)  Fee (\$)							
<u>Fee Description</u> Each claim over 20 (including Reissues)				<u>.</u>	52	26	
Each independent claim over 3 (including Reissues)					220	110	
Multiple dependent claims			390	195			
·			e Paid (\$)	<u>N</u>	lultiple Deper	dent Claims	
- 20 or HP =	x:	=		,	Fee (\$)	Fee Paid (\$)	
	Claims Fee (\$)	Fee	e Paid (\$)				
- 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3.							
3 APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)							
Other (e.g., late filing surcharge): RCE & 1-month extension of time 940.00							
SUBMITTED BY							
Signature /	Adm		Registration No. (Attorney/Agent)	24,603	Telephone	216-771-3800	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name (Print/Type) D. Peter Hochberg